



6P2183

Patent Docket No.: 42P8839

Patent

In re the Application of: Holscher

(inventor(s))

Application No.: 09/607,783

Filed: June 30, 2000

For: BUFFER ALLOCATION CIRCUIT

(title)

Mail Stop Non-Fee Amendment  
COMMISSIONER FOR PATENTS  
P.O. Box 1450  
Alexandria, Virginia 22313-1450

RECEIVED

MAR 17 2004

Technology Center 2100

SIR: Transmitted herewith is a Supplemental Response and Amendment for the above-referenced application.

Applicant claims small entity status. See 37 CFR 1.27.

XX No additional fee is required.

The fee has been calculated as shown below:

(Col. 1)		(Col. 2)		(Col. 3)	SMALL ENTITY		OTHER THAN A SMALL ENTITY	
	Claims Remaining After Amd.		Highest No. Previously Paid For	Present Extra	Rate	Additional Fee	Rate	Additional Fee
Total Claims	* 18	Minus	** 20	0	X9	\$	X18	\$ 0
Indep. Claims	* 3	Minus	*** 3	0	X43	\$	X86	\$ 0
<div>First Presentation of Multiple Dependent Claim(s)</div>					+145	\$	+290	\$
					Total Add. Fee	\$	Total Add. Fee	\$ 0

\* If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.

\*\* If the "Highest No. Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

\*\*\* If the "Highest No. Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space. The "Highest No. Previously Paid For" (Total or Independent) is the highest number found from the equivalent box in Col. 1 of a prior amendment or the number of claims originally filed.

CERTIFICATE OF MAILING BY FIRST CLASS MAIL (if applicable)

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail with sufficient postage in an envelope addressed to Mail Stop Non-Fee Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450

on March 12, 2004

Date of Deposit

Adrian Villarreal

Name of Person Mailing Correspondence

Signature

March 12, 2004

Date

\_\_\_\_\_ A check in the amount of \$ \_\_\_\_\_ is attached for presentation of additional claim(s).  
\_\_\_\_\_ Applicant(s) hereby Petition(s) for an Extension of Time of \_\_\_\_\_ month(s) pursuant to  
37 C.F.R. § 1.136(a).

\_\_\_\_\_ A check for \$ \_\_\_\_\_ is attached for processing fees under 37 C.F.R. § 1.17.

\_\_\_\_\_ Please charge my Deposit Account No. 02-2666 the amount of \$ \_\_\_\_\_.

**A duplicate copy of this sheet is enclosed.**

X The Under Secretary of Commerce for Intellectual Property and Director of the United States  
Patent and Trademark Office is hereby authorized to charge payment of the following fees associated  
with this communication or credit any overpayment to Deposit Account No. 02-2666 (a duplicate copy  
of this sheet is enclosed):

X Any additional filing fees required under 37 C.F.R. § 1.16 for presentation of  
extra claims.

X Any extension or petition fees under 37 C.F.R. § 1.17.

Date: March 12, 2004

BLAKELY SOKOLOFF TAYLOR & ZAFMAN LLP



Cory G. Claassen  
Reg. No. 50,296

12400 Wilshire Boulevard  
Seventh Floor  
Los Angeles, California 90025  
(206) 292-8600



Attorney's Docket No.: 42P8839

Patent

In re the Application of: Holscher

(inventor(s))

Application No.: 09/607,783

Filed: June 30, 2000

For: BUFFER ALLOCATION CIRCUIT

(title)

**RECEIVED**

**MAR 17 2004**

**Technology Center 2100**

Mail Stop Non-Fee Amendment  
COMMISSIONER FOR PATENTS  
P.O. Box 1450  
Alexandria, Virginia 22313-1450

SIR: Transmitted herewith is a Supplemental Response and Amendment for the above-referenced application.

Applicant claims small entity status. See 37 CFR 1.27.

XX No additional fee is required.

The fee has been calculated as shown below:

	(Col. 1)		(Col. 2)	(Col. 3)
	Claims Remaining After Amd.		Highest No. Previously Paid For	Present Extra
Total Claims	* 18	Minus	** 20	0
Indep. Claims	* 3	Minus	*** 3	0
<b>First Presentation of Multiple Dependent Claim(s)</b>				

**SMALL ENTITY**

Rate	Additional Fee
X9	\$
X43	\$
+145	\$
Total Add. Fee	\$

**OTHER THAN A  
SMALL ENTITY**

Rate	Additional Fee
X18	\$ 0
X86	\$ 0
+290	\$
Total Add. Fee	\$ 0

\* If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.

\*\* If the "Highest No. Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

\*\*\* If the "Highest No. Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space. The "Highest No. Previously Paid For" (Total or Independent) is the highest number found from the equivalent box in Col. 1 of a prior amendment or the number of claims originally filed.

**CERTIFICATE OF MAILING BY FIRST CLASS MAIL (if applicable)**

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail with sufficient postage in an envelope addressed to Mail Stop Non-Fee Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450

on March 12, 2004

Date of Deposit

Adrian Villarreal

Name of Person Mailing Correspondence

Signature

March 12, 2004

Date

\_\_\_\_\_ A check in the amount of \$ \_\_\_\_\_ is attached for presentation of additional claim(s).  
\_\_\_\_\_ Applicant(s) hereby Petition(s) for an Extension of Time of \_\_\_\_\_ month(s) pursuant to  
37 C.F.R. § 1.136(a).

\_\_\_\_\_ A check for \$ \_\_\_\_\_ is attached for processing fees under 37 C.F.R. § 1.17.

\_\_\_\_\_ Please charge my Deposit Account No. 02-2666 the amount of \$ \_\_\_\_\_.

**A duplicate copy of this sheet is enclosed.**

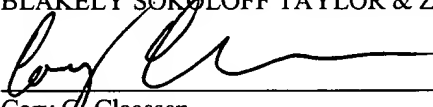
X The Under Secretary of Commerce for Intellectual Property and Director of the United States  
Patent and Trademark Office is hereby authorized to charge payment of the following fees associated  
with this communication or credit any overpayment to Deposit Account No. 02-2666 **(a duplicate copy  
of this sheet is enclosed):**

X Any additional filing fees required under 37 C.F.R. § 1.16 for presentation of  
extra claims.

X Any extension or petition fees under 37 C.F.R. § 1.17.

Date: March 12, 2004

BLAKELY SOKOLOFF TAYLOR & ZAFMAN LLP

  
\_\_\_\_\_  
Cory G. Claassen  
Reg. No. 50,296

12400 Wilshire Boulevard  
Seventh Floor  
Los Angeles, California 90025  
(206) 292-8600